LIBRARY SERVICE OR LIBRARY SECTION PROCEDURES

1. REASON FOR ISSUE: This Veterans Health Administration (VHA) Handbook revises the procedures and definitions in Appendix A; no other changes have been made. It continues to establish guidelines regarding all matters regarding the Library Service or Library Section.

2. SUMMARY OF MAJOR CHANGES: The only changes are:

   a. A revision to Appendix A which provides instructions and definitions for revised Department of Veterans Affairs (VA) Form 10-1405, Library Service Statistical Report; and

   b. Title updates as changing VHA Headquarters to VHA Central Office.

3. RELATED DIRECTIVE: VHA Directive 1930 (to be published).

4. RESPONSIBLE OFFICE: The Office of Information, Communications Service, Library Program Office (19E2) is responsible for the contents of this Handbook. Questions may be directed to 202-273- 8522.

5. RESCISSIONS: VHA Handbook 1932.1, dated September 17, 1999, is rescinded.

6. RECERTIFICATION: This VHA Handbook is scheduled for recertification on or before the last working day of December 2008.

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                              Robert H. Roswell, M.D.
                              Under Secretary for Health

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LIBRARY SERVICE PROCEDURES

1. PURPOSE

   This Veterans Health Administration (VHA) Handbook contains procedures for the conduct of the VHA Library Program in order to achieve VHA goals and objectives, and those of the Chief Information Officer (CIO).

2. SCOPE

   a. To ensure that the knowledge-based information needs of staff, students, and patients are met, each Department of Veterans Affairs (VA) medical center will establish and maintain a Library Service or Library Section providing materials, programs, and services in support of clinical, research, training, and patient health education programs. Based on local needs, patient recreational reading services may also be provided. Independent outpatient clinics (OPCs), regional offices, or joint venture facilities may also establish a Library Service or Library Section based upon established procedures for requesting an organizational change. Independent OPCs, regional offices, and other facilities without an on-site Library Service or Library Section should align themselves with a VA health care facility having a Library Service or Library Section and jointly prepare a statement of responsibilities for the sharing of library resources.

   b. The Library Service or Library Section is the only organizational unit at the health care facility level authorized to purchase, organize, control, store, or disseminate books, journals, audiovisual (AV) software, and other learning resources. Materials are made available at no charge and on a timely basis to other VA Library Network (VALNET) libraries.

   c. The Library Service or Library Section will be under direction of an academically-qualified librarian.

   d. The Library Service or Library Section should be organized into separate health sciences library and patient information center and/or library sections. The Library Service or Library Section is encouraged to establish and maintain a patient education resource center (PERC) to fulfill the VHA and the local health care facility's mission. When appropriate, in support of nursing home, domiciliary, or other long-term care programs, the Library Service or Library Section may provide recreational reading materials and services.

   e. Library Service or Library Section should expand the range of resources and services available to the local health care facility by participating in local, regional, state, and national government and other professional library or informational networks and systems.

3. OBJECTIVES

   The Library Service or Library Section is designed to serve patient care, education, research, and VA-Department of Defense (DOD) contingency program needs. It must be responsive to agency priorities and the special medical programs of the health care facility. More than a static repository,

it must be capable of identifying, retrieving, and delivering information economically and efficiently in both traditional and emerging formats.

a. **Services to Patients.** The library will provide reference, bibliographic, educational materials supportive of the treatment and rehabilitation of hospitalized and ambulatory care patients. The patient health information center or library is a source for health and disease information and training books, journals, AVs and computer programs required to support patient health education programs. Libraries may also provide recreational reading material as appropriate. Patients and their families will always be extended preferential use of materials in the patient information center or library.

b. **Services to Staff.** The library will provide reference, bibliographic, and related services for all facility personnel and students in connection with their official duties. *NOTE: The library collections and services at each facility should reflect the informational requirements of that facility.*

c. **Services to VALNET.** VALNET is comprised of VHA Library Services and VHA Central Office Library. VALNET's focus is the development, organization, implementation, and strategic review of library program policy, procedures, and projects beyond the scope of an individual health care facility, e.g. network automation, union lists, liaison with national library organizations, etc. Minimal network involvement includes ensuring the following: materials are made available free of cost and on a timely basis to all other VALNET libraries, participation in VA union lists, and submission of library statistical data as described in Appendix A. *NOTE: At various points in time individual members of VALNET may coordinate services that benefit the network.*

d. **Services to Others.** The library will provide knowledge-based information services in relation to needs of individuals, families, groups, and communities. As appropriate, the library will initiate and/or participate in ventures which foster the dissemination of health care information to professionals within the VA and the community.

4. DEFINITIONS

a. **Assessment of the Literature.** The analytical review of evidence and research results presented in the printed literature that evaluates experimental designs, adjusts for biases, and performs calculations examining the outcomes.

b. **AV Production Review Process.** The centralized coordination of the development and production of educational AV materials within VHA. Programs that have been approved through this review process are registered with National Audiovisual Center (NAC) and distributed through the VALNET AV Software Delivery System.

c. **Cataloging.** The process of describing an item in the library collection in terms of author(s), title, physical description, etc., and to make an index related to that item. This includes determining the main entry, describing the item, and assigning added entry points, subject headings, and a classification number. Index may be within a manual or automated card catalog.

d. **CD-ROM.** Acronym for compact disc read-only memory; a form of storage characterized by high capacity (roughly 650 megabytes) and the use of laser optics rather than magnetic means for reading data.

e. **Classification.** The process of assigning a numeric or alpha-numeric designation to an item, its subject or form, and indicating its physical location in the collection based upon a set classification scheme.

f. **Clinical Librarianship.** A program whereby librarians attend rounds or equivalent health care team or administrative conferences, and provides information to support patient care.

g. **Core Title.** Any journal or book title identified as being basic to the provision of information at the local level. *NOTE: Core titles should be available locally and therefore need not be made available on interlibrary loan.*

h. **Decision Support System (DSS).** A system of information resources used to estimate the outcome of alternative practices and compare the desirability of the outcomes of each option.

i. **Document Delivery.** The provision of documents, published or unpublished, in hard copy, microform, or electronic format. Considered part of the interlibrary loan process, document delivery may be facilitated by use of integrated library systems, or electronic data bases, e.g., DOCLINE, OCLC, Aerial, and telefacsimile transmission.

j. **Electronic Mail and/or E-Mail.** An electronic means of transmitting messages from one place to another with the use of telephone lines and computer terminals, e.g., Forum MAILMAN, MS Exchange, Internet.

k. **End-user and/or User-friendly Searching.** Bibliographic searching of data bases done directly by staff and students staff at the local level.

l. **Interlibrary Loan (ILL).** A transaction in which, upon patron request, one library lends an item from its collection, or furnishes a copy of the item, to another library.

m. **Knowledge-based Information.** Accessible knowledge-based information resources include clinical and management literature (in appropriate formats, including paper or electronic journals, books, technical reports, and AVs); externally produced databases; practice guidelines; and information in multiple formats for patient education (brochures, articles, pamphlets, audiovisual materials and models).

n. **Library Program Office.** VHA Central Office VALNET coordinating Office, responsible for delivery of library services.

o. **Library Program Office Management Orientation Program.** A mentoring program for new library service chiefs and managers designed to review national service program policies, procedures, and standards.

p. **Literature Attached to Charts (LATCH).** A program whereby librarians identify articles, readings, or other information pertinent to a specific patient or patient care problem, and the materials are attached to the patient chart for use by the health care team.

q. **MEDLINE.** The Medical Literature Online database produced by National Library of Medicine.

r. **Pamphlet.** An unbound non-periodical publication of at least five, but not more than forty-eight, pages.

s. **Patient Education Resource Center (PERC).** A formal area in both paper and electronic format an education setting where a collection of patient health information and educational materials consisting of a full range of media and associated equipment that is accessible to patients, their families, and health care facility staff. The PERC may be used for self-instruction, independent reading, or group instruction (on a scheduled basis). Resources included in the PERC are coordinated with clinical staff and the local patient Health Education Program in order to support health education programs.

t. **Patient Health Education (PHE).** Any combination of activities designed to facilitate voluntary change in patient behavior for improved health or for family members who assist in the patient's treatment. Activities typically focus on keeping patients or their families informed about the patient's health status, rights, treatment plans, and development of self-care skills.

u. **Reader Services.** Library activities and operations, including circulation services, reference, computerized search services, end-user searching instruction, ILL, ward cart, and other services with similar characteristics, which entail regular, direct contact between library personnel and users.

v. **Shared Coordinated Materials Collections.** All book, periodical, and AV titles approved as part of a cluster or network. Considered one collection for purposes of retention and ILL, these shared collections allow all libraries in the designated group to have access to a larger number of titles held for a greater number of years.

w. **Selective Dissemination of Information (SDI).** Program designed to keep users up-to-date on new developments and materials published in specific fields of interest; it is also referred to as a "current awareness" service.

x. **Specialized Reference (Administrative).** Materials, books, and journals purchased by Library Service or Library Section that are maintained by an individual or office other than the Library Service or Library Section. These materials must be:

(1) Critical to the successful accomplishment of official duties;

(2) Consulted by the individual or office on a daily basis; and

(3) Accessible to other facility staff.

y. **Technical Services.** The series of tasks involved which ensures that materials are acquired, classified and cataloged, and processed for addition or removal from the collection. In contrast to reader services, technical services do not require direct contact with library patrons.

z. **Union List.** A bibliographic listing of all VALNET books, journals, and/or AVs that are available for loan within the agency. This listing also includes information on the individual holdings of each library.

aa. **VALNET.** VALNET is comprised of VHA Library Service or Library Sections and the VHA Central Office Library. It is a library network of national significance that shares resources, information, ideas, etc., and offers support and guidance to each other.

bb. **VALNET AV Software Delivery System.** A centrally-funded and managed program ensuring the availability of educational and informational AV material for personnel throughout the agency. Commercially and VA-produced AV programs are sent to VALNET libraries at one of four delivery levels.

cc. **VALNET Database Service.** Centrally-funded and managed data base delivery program providing personnel throughout the agency with access to on-line commercial databases.

dd. **VALNET Print Delivery System.** Centrally-funded and managed programs ensuring the availability of educational and informational print materials to personnel throughout the agency. Commercially and VA-produced print materials are distributed to VALNET libraries in response to needs expressed through agency priority statements and needs assessments.

ee. **Videonotebook.** Locally-developed materials in any of the AV formats, whose primary purpose of which is to record or document a local event, procedure, etc. Videonotebooks have a limited life span of a year or less and are not assigned centralized cataloging.

ff. **Veterans Integrated Service Network (VISN).** Twenty-two service networks comprised of multiple VHA facilities. Activities and resources are managed and coordinated by network or VISN Directors.

5. SHARING RESOURCES

a. VALNET libraries serve as resource centers to support the goals and objectives of VHA service areas, networks, clusters, and individual health care facilities to enhance the quality of health care delivery to our nation's veterans. Sharing programs (e.g., shared acquisitions, VALNET data base service, coordinated collection development, consolidated procurement, AV and print delivery, etc.) support national education, training and information needs, and augment local resources.

b. Sharing is an effective and efficient way to maximize resources. It has particular application in those communities where VALNET provides the strongest health sciences library programs and collections. Individual libraries should consider opportunities to make materials and services available to the local medical community, either free, quid pro quo (shared), or fee-based, under the authority of Title 38 United States Code (U.S.C.) 8154. ***NOTE: VALNET libraries should initiate,***

and/or participate in local library or information consortia to strengthen and expand resources and services.

6. PRIORITIES FOR SERVICE

a. The primary clientele of the Library Service or Library Section include the patients and their families, clinical and administrative staff, students or other trainees of the local health care facility, and staff at aligned VA facilities. Subject to the established needs of the primary clientele, locally-based materials, programs, and services will be made available for use in the following priority:

(1) Local patients, staff, and students;

(2) VA facilities in VISN;

(3) VA facilities in the agency as a whole;

(4) Local libraries with existing formal and informal agreements among libraries; and

(5) All other libraries.

b. The Library Service or Library Section is responsible for ensuring equitable access to centrally-provided resources held at a local level, e.g., AV or print delivery materials.

7. MANAGEMENT RESPONSIBILITY

The Library Manager at each facility is responsible for:

a. Directing and managing all aspects of the Library Service or Library Section, including identification of required resources, budget development and justification, personnel, space-equipment, and the facility's total book, journal, educational computer software, and AV collections.

b. Managing external, knowledge-based information resources. Managers should possess and maintain knowledge in the following areas: assessment of user needs, health science literature and resources, principles and practices in the organization, and storage and retrieval of information.

c. Maintaining a cooperative, proactive approach to interaction with other services and VA facilities.

d. Ensuring that library personnel are kept informed of the status of local clinical, administrative, educational, patient health education, and research programs through personal contacts, meetings (e.g., education, resources, and computer utilization committees), multidisciplinary planning conferences, and participation in other health care facility activities. All library personnel must function as active members of health care teams.

e. Managing the selection, acquisition, organization, preservation and availability of library materials and knowledge-based information resources and planning and implementing library

programs, services, and publicity to ensure proactive delivery of information. Regular needs assessments, user satisfaction and other evaluation reviews should be conducted and the results used to develop or modify programs, resources, services, and materials collections.

8. LIBRARY STAFF

   a. **Library Manager Positions.** Library Manager positions are not centralized; however, actions taken on the incumbents and the positions are of interest and concern to VHA Central Office officials. *NOTE: The controls stated in VHA Supplement to MP-5, Part I, Chapter 250, will be followed. http://vaww.va.gov/publ/direc/personel.htm*

   b. **Additional Library Staff Positions.** Additional library staff positions are authorized locally at the discretion of facility management based upon the size and type of the facility, complexity of programs offered, training responsibilities, affiliations, VISN, network, or cluster library roles, sharing programs, and consortia participation. Adequate clerical support is essential for the performance of such duties as processing correspondence and materials, typing reports, and maintaining library records and report files.

   c. **Recruitment.** Selection of VALNET librarians may be made from among the qualified candidates rated and evaluated by the Special Examining Unit, VA Medical Center, Richmond, VA. Application forms should be obtained and returned directly to that office.

   d. **Training.** The Library Manager will ensure equitable access to continuing education and in-service training opportunities for all library personnel, subject to local facilities guidelines.

   (1) Based on their previous VA library and management experience, new Library Managers may participate in the Library Program Office-Management Orientation Program.

   (2) Library Service or Library Section staff are encouraged to become involved in the programs of professional organizations and associations in both membership and leadership roles in order to update and reinforce professional knowledge and skills.

9. PHYSICAL FACILITIES

   a. **Space Criteria.** The guidelines of the latest VA Handbook 7610 (400), "Planning Criteria for VA Facilities," "Veterans Health Administration - Library Service," (http://vaww.va.gov/facmgt/standard/standard/7610-400.doc) will be used to determine minimum space requirements. Library Service or Library Sections not meeting space criteria should develop plans addressing corrective measures, submit plans to medical center management for inclusion in facility development plans and keep Library Program Office appraised of both plans and actions taken by the health care facility. Special attention should be given to ensure the Library Service or Library Section's accessibility to handicapped users is met, in compliance with the Public Laws. VA Guidelines PG 18-13, "Barrier Free Design Handbook" (http://vaww.va.gov/facmgt/standard/etc/barrfree.doc) was written to comply with all Federal regulations. In facilities where space is not specifically designated for a patient information center or library, materials will be made available through the health sciences library program until such time that a physically separate, designated patient information center or library space is available.

b. **Compact Shelving.** Compact shelving may be installed when space limitations within a health care facility prohibit expansion of the Library Service or Library Section to meet space criteria, or when the library has outgrown existing shelving capacity but still needs to retain materials essential to the mission and vision of their health care facility.

c. **Location.** The health sciences library and patient information center or library should be located in contiguous areas to increase efficient use of library staff. Office and workroom areas should serve both libraries. A single circulation desk area may serve both libraries whenever it is possible to do so. Health sciences and patient information center and/or libraries should be conveniently located for users. If patient information centers are not located adjacent to health science libraries then it suggested that they be located within the outpatient clinic areas for ready access by patients and their families.

d. **Environment.** In all renovation, remodeling, construction, and space planning activities, the library should be viewed as an integrated information and learning center containing print and non-print materials and equipment. Space should be designed for efficient workflow, the comfort of users, and the use of information technology.

10. EQUIPMENT

a. **Basic Requirements**. Sufficient quantities of specialized and office equipment must be permanently available within Library Service or Library Section. Specialized equipment includes photocopiers, ½ inch HQ-VHS videocassette players and/or monitors, telefacsimile devices, slide projectors, audiocassette players, viewing screens, microform reader and/or printers, CD-ROM players, and microcomputers for both library personnel and users.

b. **Control**. In the absence of a Medical Media Service, all facility AV hardware (photographic, illustration and graphic, AV, and television production and presentation equipment) must be charged to the Consolidated Memorandum Receipt (CMR) of Library Service or Library Section.

11. FISCAL CONTROL

Annually, the Library Manager will describe and present to health facility management a program budget, which conforms to VA facility guidelines. Budgeting for the following categories should be included: personnel, materials, equipment purchase and rental, ILL, consortia participation, contracts, collection preservation and on-line bibliographic access. The budget justification should be based on existing and projected workload, program standards, and documented need for new or modified programs. Separate budget entries should be prepared for book, journal, AV software, educational computer software, data base use, ILL, contract needs for special resources, and specialized reference collections.

a. **Authority.** The Library Manager is the control point official for the acquisition of all books, journals, AV software, and educational computer software purchased through the Medical Care Appropriation. In order to avoid unnecessary duplication of expensive materials, and ensure facility-wide access to these resources, concurrence of the Library Manager is necessary for the acquisition of all such items using funds from other appropriations.

b. **Support of Research and Development Programs**. Because Library Service or Library Section support is required for medical research programs, it is essential that there be an equitable distribution of costs for these services between the Medical Care and the Medical Research Appropriations. Programs, services, and materials provided by Library Service or Library Section, above and beyond patient care needs will be reimbursed from the Medical and Prosthetic Research Appropriation (see MP-4, Pt. V, Ch. 6C.07). This includes any fees incurred by Library Service or Library Section on behalf of Research for borrowing or the purchase of books, journals, and AVs unique to their needs. Books, journals, and AVs may not be purchased directly from the Medical Research Appropriation (see M-3, Pt. I, Ch. 1.03).

12. SECURITY

The Library Manager will implement policies and procedures to ensure the security of library personnel, equipment, and materials. All equipment will be properly marked and, as appropriate, recorded on the Library Service or Library Section CMR.

13. PRIVACY

The Library Manager and library staff must protect each user's right to privacy with respect to information sought or received; and materials consulted, borrowed, or acquired.

14. VA NATIONAL NETWORK OF LIBRARIES OF MEDICINE INTERFACE

VALNET libraries should interface with the National Network of Libraries of Medicine (NNLM). Current programs include ILL and use of their on-line databases. VALNET librarians should participate in the NLM goal-setting process to ensure VA interests are known.

15. REPORTS

a. **Library Service or Library Section Statistical Report (Records Control Schedule (RCS) 10-0020).** The Library Manager using VA Form 10-1405, Library Statistical Report FY __, will prepare this report. The original or faxed copy are to reach Library Program Office (193B), VHA Central Office and Chief, Library Service, VA Medical Center Salt Lake City, UT, no later than 1 month following the close of the fiscal year (see App. A).

b. **VA Union Lists of Library Materials**. Annually, all health care facilities will submit reports of changes in locally-maintained journals to be reflected in VA Union List of Periodicals; guidelines and schedules for submissions are provided by the Library Program Office. Changes to book and AV union lists will be submitted as needed.

16. RESOURCES

a. **Selection.** The Library Manager will establish a written collection development policy based upon professional library selection standards, the information needs of the facility, and information requests submitted by patients, staff, and students, to ensure a balanced collection and availability of materials.

(1) **Gift Materials.** All books, journals, and AV software donated to the health care facility are subject to review by the Library Manager. Materials meeting established Library Service or Library Section collection development policy criteria will be added to the collection; rejected material will be disposed of according to routine Office of Acquisitions and Material Management (OA&MM) procedures. Unsolicited donations of religious literature will be referred to Chaplain Service for disposition (see M-2, Pt. II, Subpara.4.05c). Appropriate acknowledgement letters will be sent following local facility guidelines.

(2) **Censorship.** Materials shall not be excluded because of origin, background, or views of those contributing to their creation. Materials and information representing different points of view on current and/or historical issues, within the scope of the local collection development policy, should be provided for in the health science library, patients library, or the patient information center. Materials will not be prescribed or removed because of partisan or doctrinal disapproval. VA does not endorse the censorship of materials.

b. **Collections.** Materials, organized into reference and circulating collections, will support the informational, therapeutic, and educational needs of health care facility patients, residents, personnel, staff, and students, and reflect the commitments of any sharing agreements. Material and format selection shall be based on such factors as frequency of use, availability of equipment, and cost-effective alternate sources. Collections are to be accessible to facility patients, staff, and students for browsing and other independent use. Collections are reviewed annually based on user needs, using such data as user inquiries, circulation, and ILL data to identify items to be withdrawn and subject areas to be expanded. Materials that are outdated or which have not been used sufficiently shall be removed from the materials collection in accordance with locally-established Library Service or Library Section materials weeding criteria. Materials will then be excessed according to local facility guidelines.

(1) **Health Sciences Collection.** The collection is intended for use by health care facility personnel and students; it will be developed to meet the information and education needs of the facility as a whole. The collection, shall include materials in such subject areas as clinical medicine, pre-clinical sciences, allied health, management, personnel administration, nursing, engineering, quality management, etc. Appropriate formats include, but are not limited to, books, journals, AVs, computer software, microforms, and on-line information sources (e.g., Web sites).

(2) **Patient Use of the Health Sciences Library.** Patients should have access to non-technical health information materials in a variety of formats. In such cases where clinical materials are requested by patients, their family, or health care providers, Library Service or Library Section should make these materials available according to established local facility guidelines.

(3) **Patients' Collections.** The PERC will include materials supporting the planned, coordinated patient health education programs. Materials are for the direct use by patients and their families in order to help them understand about wellness and diseases in general; and their specific diagnoses, prognoses and treatment regimens. This will allow them to become an active participant in the Shared-Decision process.   Where there is not a separate Patient Information Center Library or PERC, the Library Service or Library Section will provide access to health information materials (e.g., books, pamphlets, AVs, journals), through the health sciences library. Where extended stay units (e.g., nursing home care, domiciliary, spinal cord injury, psychiatric) exist, the Patient Information Center Library may include recreational materials.

(4) **Collection Organization**

(a) Reference. Reference material may exist as hardcopy and/or computer-based products. A basic reference collection, which will include such items as standard subject and language dictionaries, encyclopedia, manuals, handbooks, and directories necessary to support facility programs; and a medical reference collection, which will include materials used on a daily basis, such as basic clinical and drug. Reference materials must be readily accessible for consultation and are generally non-circulating except for special circumstances.

(b) Circulating. A collection of current knowledge-based materials in a variety of formats that was selected to meet faculty information and education needs. These materials are available for use within the library, the facility, or ILL loan.

(5) **Specialized Reference (Administrative)**

(a) Books, journals, and educational computer products which are critical to the successful accomplishment of official duties and used on a daily basis may be housed in services on sections outside of the library. The facility should determine the need and cost to maintain duplicate collections. Specialized Reference collections should not be created within a service based solely upon the ease or convenience of access by an individual, service or section, or educational program. All requests for items to be housed outside Library Service or Library Section will be submitted to the Library Manager for approval. If approved, these requests will be processed according to locally-established Library Service or Library Section procedures and funding availability. *NOTE: No more than 10 percent of the Library Service total materials funds should be allocated for the purchase of specialized reference items during any fiscal year. AV material will not be purchased for specialized reference.*

(b) Upon receipt, materials will be noted by Library Service or Library Section, and released to the appropriate individual from requesting service or section. Materials remain the property of Library Service or Library Section.

(c) Each specialized reference collection will be inventoried by the housing service annually, with any losses noted; a report of findings will be provided to the Library Manager. No new or replacement items should be acquired for specialized reference collections until this inventory is completed and report findings submitted. Materials that are outdated, superseded, or otherwise found to be in excess to service or sections needs, will be returned to the Library Service or Library Section for disposition.

(6) **Types of Materials**

(a) Journals. Current subscriptions should be maintained for key health sciences and management journal titles. A 10-year back file for most professional journals is the recommended retention period, subject to space availability. The number of subscriptions and back file retention period should be based on:

1. The variety of health care facility programs and affiliations, special local needs, and the extent of participation in shared acquisitions programs;

2. Scope, depth, and indexing of the journal;

3. Copyright restrictions; and

4. Alternate availability.

(b) Microforms. Titles in microform may be purchased in lieu of binding print materials to retain back files of journals or to enable retention of low-use documents.

(c) Monographs. Current editions of monographs will be acquired, cataloged, classified, and maintained in support of patient care, education, research, and management activities of the facility.

(d) AVs. All facility AV software is under the purview of Library Service or Library Section for control, cataloging, housing, circulation, and ILL. ***NOTE:***. *Four AV formats are approved for VHA: ½ inch HQ-VHS videocassette, 2 by 2 inch slide, audiocassette, multi-media material.*

1. The collection may include computer-based training courseware and CD-ROM materials.

2. Programs distributed through the VALNET AV Software Delivery System will be publicized and made available for use by all facility staff, students, and patients as appropriate.

3. Videonotebooks and/or copies of satellite broadcasts supporting local facility education and training programs may be housed in, and controlled by, the Library Service or Library Section, but should not be loaned outside the facility. The content and documented use of these materials should be reviewed annually.

4. AVs containing information, or pictures of patients, except those purchased from commercial sources or approved through the AV Production Review Process, may not be made available in or through Library Service or Library Section. Procedures and guidelines set forth to protect patient privacy must be observed at all times.

(e) Pamphlets. Pamphlets are not within the sole purview of Library Service or Library Section. Pamphlets being used as handouts for Patient Health Education (PHE) activities and programs should be purchased through a central PHE control point. This control point should be the fiscal responsibility of the facility PHE Coordinator. In the absence of this position, the fiscal responsibility may be assigned to the Education Coordinator or Library Service or Library Section.

Bulk supplies of pamphlets are not be funded from the Library Service or Library Section annual budget.

   (f) <u>Electronically published materials.</u> Such materials including monographs, indexes, periodicals, etc., published in such formats as CD-ROM and other electronic storage media. Items often take the place of the hard copy.

17. READER SERVICES

   a. **Reference.** Reference services will include but not limited to, on-site bibliographic data base searching, response to patron inquiries, readers advisory, end-user searching and instruction, SDI, quality-filtering of the literature, and bibliographic verification.

   b. **Database Service.** Library Service or Library Section must have on-site access to MEDLINE files of the MEDLARS databases, either on-line or through CD-ROM. Facilities needing access to information not contained in MEDLINE should obtain a local subscription to the appropriate data base service, e.g., BRS, DIALOG. Facilities without on-site access to DIALOG may forward search requests to their Designated Network Search Site (see App. B).

   c. **Circulation.** Policies and procedures for the circulation of library materials, including restricting library privileges of delinquent borrowers, will be detailed by local facility memorandum. Library materials will not be issued on indefinite loan to an individual or a service unless special circumstances exist.

   d. **ILL.** Informational needs beyond the scope of the library collection will be met through ILL agreements established with other libraries. Payment for loan charges is authorized using the same fiscal subaccounts as for book, periodical, and AV software procurement. VALNET libraries may impose fees upon non-VA libraries for providing ILL under authority of 38 U.S.C. 8154. Monies received should be handled according to Supplement MP-4, Part VII and VHA Directive 4721, Change 2. Access to FORUM MAILMAN and DOCLINE is required to expedite the transmission of ILL requests to other VALNET and non-VALNET libraries. Material required for decision making in immediate patient care should be acquired in the most expeditious manner possible and should be sent via telefacsimile or Aerial when possible. In requesting routine ILL of both print and non-print library materials, VISN and local consortiums collections should be access first. VA libraries are expected to participate in the National Library of Medicine DOCLINE system and as such are encouraged to obtain internet access for this purpose. Library Service or Library Section may also subscribe to locator document delivery services, (e.g., OCLC, First Search, Carl, Adonis, etc.) to assist in obtaining interlibrary loans.

   e. **Ward Service.** The Library Service or Library Section may provide ward cart service for patients who are unable to visit the Patient Information Center Library. Ward cart visits may be provided in cooperation with Voluntary Services.

   f. **User Education.** The Library Service or Library Section should conduct both formal and informal library orientations and training sessions to inform library users about the library policies, materials, programs, and services. Printed materials or on-line describing services, collections, policies, and procedures should be made available.

g. **Hours of Operation.** The Library Service or Library Section should be staffed during the regular tour-of-duty. Expanded hours for early morning, evening, or weekends may be authorized when such need is documented. After-hours, key access to the health sciences library is authorized in compliance with the standards of the Joint Commission on Accreditation of Healthcare Organizations (JCAHO).

18. TECHNICAL SERVICES

a. **Acquisitions.** The Library Manager, in conjunction with OA&MM, is responsible for determining the method of procurement for Library Service or Library Section materials. Library Service or Library Section materials are procured through OA&MM using established OA&MM procedures.

b. **Organization of Material**

(1) **General**

(a) Books, AVs, and similar materials must have cataloging records, including full descriptive cataloging and subject classification. These materials should be shelved in subject classification order.

(b) Periodicals, whether in original or microform formats, should be shelved alphabetically according to title.

(c) Pamphlets may be indexed by broad subject classification and shelved or maintained in filing cabinets according to the subject classification.

(d) Books, periodicals, and AV materials published in electronic format may be shelved with their print counterparts or maintained on a file server for distributed use.

(2) **Cataloging and Classification.** Library materials are cataloged and classified through a centralized contract using the OCLC database for bibliographic records. The database is also available as a source of specialized local cataloging products. Library Services or Library Sections choosing another source for cataloging records must provide periodic machine-readable records of library holdings in Machine Readable Cataloging (MARC) format. All requests for centralized cataloging services must originate from VHA Central Office Library Program Office.

c. **Preservation.** The Library Service or Library Section will arrange for the preservation of library materials according to locally-established retention policies. The Library Manager will determine the binding specifications for each journal on a title-by-title-basis. OA&MM procedures will be followed when commercial binding is obtained.

(1) **Patient Health Information Center or Library.** Books and periodicals for the patient information center or library, as a rule, will not be rebound.

(2) **Health Sciences Library.** Books will not be rebound except for out-of-print or specialty titles whose reference value dictates that other editions or titles cannot replace them.

d. **Excess Materials.** Materials that are outdated, in poor physical condition, or in excess of the information needs of the facility, will be removed from the collection. Excess materials that are current and in good condition may be offered to other VALNET libraries via FORUM MAILMAN. Materials not required by other VALNET libraries may be used as duplicate exchanges with public or private agencies whenever it is to the advantage of VA to do so. Remaining materials will be considered in excess of all VA requirements and will be given to OA&MM in accordance with facility guidelines. Excess materials will not be given to individuals for personal use or transferred to other facility services as specialized reference materials.

e. **Accountability.** When library materials charged to personnel or patients are lost through negligence or returned in unusable condition, Official Form (OF) 1114, Bill for Collection, will be prepared and forwarded to Fiscal Service for processing.

f. **Parcel Post.** VA-owned materials will not normally receive special mail handling; however, such methods may be authorized by the Library Manager to ensure accurate and timely delivery. Materials obtained on a loan or rental basis from other government or commercial sources will be returned in accordance with local facility mailing policy.

19. PUBLICATION OF PROFESSIONAL PAPERS

a. The preparation and publication of professional papers by VA employees is encouraged as a vehicle for contributing to the advancement of professional education and practice within the VA and the health care community.

b. Articles submitted for publication which make reference to Library Network policy or VALNET in general, however, must be submitted to the Co-Director, Health Information Resources (193B), VHA Central office, for review prior to submission for publication. Any article in which the author is identified as a VA employee must contain the following disclaimer:

"This article reflects the author's personal view and in no way represents the view of the Department of Veterans Affairs or the U.S. Government."

20. CENTRALLY DIRECTED PROGRAMS

a. **VALNET AV Software Delivery System.** The VALNET AV Software Delivery System supplements individual health care facility learning resources. Multiple copies of select AV programs are bulk-purchased and delivered centrally to designated locations to conserve funds. This system provides equal access to materials necessary to support VA-wide information, staff development, and training activities (see App. D).

b. **VALNET Print Delivery System.** The VALNET Print Delivery System supplements individual health care facility learning resources with print material obtained in multiple copies and delivered centrally to designated locations to conserve funds and provide equal access to materials necessary to support VA-wide information, staff development, and training activities (see App. E).

   c. **Union Lists.** Library Program Office, VHA Central Office, coordinates the development, maintenance, and updating of union lists of books, journals, and AVs appropriate for sharing within the Agency. Access by VALNET libraries to these union list systems is based on reciprocal loaning and borrowing agreements. Access or subscription charges are the responsibility of the local health care facility.

   d. **VALNET Data Base Service.** This service is provided by Library Program Office VHA Central Office, to ensure comprehensive, cost-effective access to commercially available data bases (see App. B).

DEFINITIONS AND INSTRUCTIONS FOR VA FORM 10-1405
LIBRARY SERVICE OR LIBRARY SECTION STATISTICAL REPORT, RCS 10-0020

   NOTE: the Department of Veterans Affairs (VA) Form 10-1405, Library Service or Library Section Statistical Report, Report Control Symbol (RCS) 10-0020, can be found on web site: http://vaww.vhaco.va.gov/VALNET/Documents/Annual_Statistical_Report_Form.xls in the Excel program. The line numbers in the" see references" refer to the numbers on the Annual Statistical Report form itself. The line number references do not refer to, or correspond to, the row numbers in the Excel Program.

1. The Library Service or Library Section must report revenue generated and all dollars expended by the Library Service or Library Section. This includes:

   a. Funds deposited by Fiscal Service into the Library Service or Library Section fund control point as its fiscal year budget allotment.

   b. Funds transferred from other resources into the library's fund control point. Example: Pharmacy transfers funds to the library for the purchase of American Hospital Formulary Service (AHFS) Drug Information books. The library would report those funds under Line 1, Column D.

   c. Funds in the facility General Post Funds designated specifically for use by the Library Service or Library Section.

   d. Revenue generated by the library. For example: the Library generates income by charging for interlibrary loans. Revenue generated would be reported in Section A, Column E.

   e. Funds transferred by the library out of its fund control point for use by other services or groups. For example: the library transfers $5,000 to the Veterans Integrated Services Network (VISN) Fiscal Office to pay their facility's portion of a contract for access to "MDConsult." The Library would report that $5,000 under Line 6, Column A.

2. DEFINITIONS

   a. **Administrative Materials Collection, (formerly entitled Specialized Reference).** The Administrative Materials Collection is material(s) (e.g., books, journals, audiovisuals, etc.) purchased by Library Service or Library Section that is maintained by an individual or office other than the Library Service or Library Section. *NOTE: See Section A, Lines 1-6, Column D.*

   b. **Archival Medium.** An archival medium is the process of recording material; it is expected to retain information, so that such information can be retrieved without significant loss when properly stored. For the purposes of the Annual Statistical Report archival medium specifically refers to journals stored on a microfilm or CD-ROM format. *NOTE: See Section A, Line 4.*

c. **Audiovisual Software.** AV software is any stand-alone audiocassette, slide set, videocassette, motion picture, model, CD-ROM, microforms or multimedia kit that is cataloged and considered part of the local library collection. For reporting purposes, all audiovisual software formats are counted together. *NOTE: See Section A, Line 5 Audiovisuals, Columns A-E; Section B, Lines 1, 2, and 3, Column D; Section C, Lines 1, 2, 3, 4, 5, & 6; Column C.*

d. **Audiovisual (AV) Hardware.** AV hardware is equipment used to view or listen to any AV software format: slide projector, overhead projector, motion picture projector, projection screen, television and/or monitor, videocassette recorder and/or player, DVD player and/or recorder, LCD projector, etc. This does not include computers. *NOTE: See Section C, Line 10.*

e. **Circulation.** Circulation is the number of materials used by library customers (staff, students, patients, etc.) either within or outside the library. One book "checked-out" and two books and one journal retrieved from a study carrel or table and re-shelved by library staff needs to be counted as four circulations. Include materials transferred, circulated, and/or loaned between or among the divisions of a consolidated facility, and materials "checked-out" from a ward cart (see subpar. 2x). Circulation of equipment (i.e., overhead projectors, video projectors, slide projectors, etc.) is not included here. *NOTE: See Section C, Lines 2(E),4(E), and 6(E), Columns A-C.*

f. **Consolidated Facility.** VA medical centers consisting of more than one division operating under one administration and considered by VA to be a single facility.

g. **Electronic or Internet Resources.** Electronic or Internet resources include electronic (e.g., CD-ROM, computer diskette, DVD, or laser disk format, etc.) or Internet accessible versions of journals, monographs, audiovisuals, or bibliographic or full-text databases. These are resources for which the library has paid a fee for acquisition or access. *NOTE: See Section A, Line 2-6, Columns A-D; Section B, Lines 1-3, Columns A-D; and Section C, Lines 1-6, Columns A-C.*

h. **Health Sciences Library.** This was formerly called the Medical Library.

i. **Interlibrary Loan (ILL).** ILL is a transaction whereby one library lends an item from its collection, or furnishes a copy of the item, to another library or conversely borrows an item from another library's collection. This does not include items transferred, loaned, and/or circulated between divisions of a consolidated facility. *NOTE: See Section C, Lines 1(A&B), 2(C&D), 3(A&B), 4(C&D), 5(A&B), 6(C&D), Columns A-C.*

j. **Library Fiscal Control Point.** The library Fiscal Control Point is the budget or funds under the sole purview of the Library Service or Library Section. *NOTE: See Section A.*

k. **Local Facility.** The local facility is the VA medical center, domiciliary, or outpatient clinic in which a Library Service or Library Section is located including those remote sites for which it has direct responsibility for providing service, e.g., single division medical centers, two or more division medical centers, and independent outpatient clinics.

l. **Monographs.** Monographs are cataloged, classified material (such as hardbound or paperback book, document, pamphlet, technical report, manuscript, proceeding, and monographic or publishers series) either complete in one part, or complete in a finite number of separate parts. Materials may be in print, microform, or electronic format; and may have been either cataloged locally, by an outside contractor, or by the national contract cataloger. ***NOTE:*** *See Section A, Lines 1-2, Columns A-E; Section B, lines 1-3, Column A; Section C, Lines 1-6, Column A.*

m. **Networked Materials.** Networked materials are distributed to the medical center libraries and identified with a network designation of All/HCF, VISN, SPECIAL, or REGIONAL in the call number field. These materials may be in any format, e.g., audiovisual, print, or electronic (CD-ROM). They are not considered part of the local site's collection and are not to be reported as part of a site's local collection in Section B Materials Collection. ***NOTE:*** *Usage of networked materials is reported in Section C Materials Usage.*

n. **Non-VA Libraries.** Non-VA libraries consist of all libraries, other institutions, and individuals outside the VA system. ***NOTE:*** *See Section C, Lines 1(B), 2(D), 3(B), 4(D), 5(B), and 6(D), Columns A-C.*

o. **Operating Expenditures.** Operating expenditures are funds expended by the Library Service or Library Section during the reporting fiscal year. This includes funds from the Library Service or Library Section fiscal fund control point, facility General Post Funds, funds transferred from other accounts into the Library control point, budget supplements, etc. This does not include funds expended by the VISN or by another service or section's fund control point to purchase products that may be considered 'library' material. ***NOTE:*** *See Section A, Lines 1-9, Columns A-D.*

p. **Patient Health Education Collection or Library.** The Patient Health Education Collection or Library consists of print and non-print materials for patients, patients' families or caregivers, and medical center staff to support patient care and enhance the shared decision making process between the patients and their providers. Materials are also suitable for consumer awareness programs. These materials may be housed in a Patient Education Resource Center (PERC), Patient Information Center or Library, Health Sciences Library, or other appropriate setting within the medical center under the purview of the Library Service or Library Section. ***NOTE:*** *See Section A, Lines 1-9, Column C; Section B, Line 2(A-C), Columns A-D; Section C, Line 3(A&B), Line 4(C-E), Columns A-C; Line 7, Row B.*

q. **Patient Information Center or Library (formerly called the Patient or General Library).** The Patient Information Center or Library is the responsibility of the Library Service or Library Section. ***NOTE:*** *See Section A, Lines 1-9, Column C; Section B, Line 3(A-C), Columns A-D; Section C, Lines 5(A-B), 6(C-E), Columns A-C.*

r. **Periodicals.** Periodicals are publications, which have no foreseeable end, that are issued over a period of time, usually on a regular basis, with some type of numbering used to identify issues.

(1) **Periodicals-Active.** Active periodicals are journals, magazines, newspapers, and/or serial publications to which the library has a current paid electronic or print subscription or free print subscription and is actively receiving, adding and retaining the title in its collection. Materials may be in print, microform, AV (e.g., <u>Audio Digest</u>) or electronic format (e.g., CD-ROM, Internet, etc.). Some examples include popular magazines (<u>Newsweek</u>), scholarly journals (<u>Journal of the American Medical Association</u> (<u>JAMA</u>)), and electronic journals (<u>The Scientist</u>), and annual reports. *NOTE: See Section A, Lines 3-4, Column A-E; Section B, Lines 1-3, Column B; Section C, Lines 1-6, Column B.*

(2) **Periodicals-Inactive.** Inactive periodicals are journals, magazines, newspapers, and/or serial publications, which the library no longer receives, but has elected to retain as part of its collection and are available for use by library patrons. Includes cancelled periodical subscriptions or titles that have ceased publication. <u>Does not include title changes for periodicals that continue to be published under a new title and subscribed to by the Library Service or Library Section.</u> Materials may be in print, microform, AV (e.g., <u>Audio Digest</u>) or electronic format (e.g., CD-ROM, Internet, etc.). Included are: popular magazines (<u>Newsweek</u>), scholarly journals (<u>JAMA</u>), electronic journals, and annual reports. *NOTE: See Section B, Lines 1-3, Column C; Section C, Lines 1-6, Column B.*

s. **Photocopy.** A photocopy is material (e.g., journal articles, book chapters, etc.) copied from original material or microform. This includes material printed directly from electronic sources (e.g., CD-ROM, Internet). For reporting purposes count the number of articles, book chapters, whole or in part, or topics. Do not report the number of pages photocopied. *NOTE: See Section C, Lines 1-6, Column A-B.*

t. **Revenue Generation.** Revenue is monies earned as revenue by the Library Service or Library Section, such as payment for services for which the library charges a fee (e.g., photocopying, ILLs, search services, overdue fines, etc.). This includes revenue retained for use by the Library Service or Library Section, or returned to the medical center for other uses. <u>It does not include Bills of Collection issued for lost or damaged materials.</u> *NOTE: See Section A, Lines 1-9, Column E.*

u. **Searching.** Library staff mediated searching for users. Mediated searches usually involve a reference interview with the patron to determine appropriate resources and construction of the search strategy. *NOTE: See Section C, Line7, Rows A-C.*

v. **Specialized Reference.** See Administrative Materials Collection (subpar. 2a).

w. **Title.** A title is an item for which a separate shelf-list card, on-line catalog entry, or separate entry on a journal title holdings list has been made. *NOTE: See Section B, Lines 1-3, Columns A-D.*

x. **Ward Cart.** A ward cart is a mobile unit (e.g., cart, book truck, etc.) that can be transported throughout the medical center and used by the Library Service or Library Section to circulate (check-out) library materials or to distribute free materials (e.g., magazines, paperback books, pamphlets, etc.). *NOTE: See Section C, Lines 1-6, Columns A-C for library materials*

checked-out from the ward cart; Section C, Line 8 for free items distributed or given away from the ward cart.

3. INSTRUCTIONS

a. **Section A - Operating Expenditures and Revenue Generation (Library Service or Library Section).** *NOTE: See Definitions for: Administrative Materials Collection (subpar. 2a); Archival Medium (see subpar. 2b); AV Software (subpar. 2c), Health Sciences Library (subpar. 2h), ILL (subpar. 2i), Library Fiscal Control Point (see subpar. 2j); Monographs (subpar. 2l); Patient Health Education Collection or Library (subpar. 2p), Patient Information Center or Library (subpar. 2q), Periodicals (subpar. 2r), and Title (see subpar. 2t).*

(1) **Line 1, Columns A-D.** Dollars spent on monographs in print format. For example: funds expended to purchase a print copy of Harrison's Principles of Internal Medicine. Dollars spent to purchase a print monograph that is accompanied by a CD-ROM are reported here.

(2) **Line 2, Columns A-D.** Dollars spent on monographs in electronic format. For example: funds expended to purchase a CD-ROM or Internet accessible version of Harrison's Principles of Internal Medicine. Dollars spent to purchase an electronic database collection of monographs such as StatRef are reported on Line 6, Column A.

(3) **Line 3, Columns A-D.** Dollars spent on periodicals in all formats, i.e., print and non-print. For example: funds expended to purchase a print subscription to JAMA or electronic or Internet access to Rehabilitation Nursing.

(4) **Line 4, Columns A-D.** Dollars spent on periodicals in archival mediums, i.e., microfilm, CD-ROM, etc. This does not include dollars spent on binding print journals. Report binding under Line 9, Column A.

(5) **Line 5, Columns A-D.** Dollars spent on audiovisuals in all formats. For example: funds expended to purchase a videocassette of Joel Barker's Wealth, Power, and Innovation, or a CD-ROM version of The Six Pillars of Character, or 35mm slides on How to Prepare Lab Specimens.

(6) **Line 6, Columns A-D.** Dollars spent on electronic or Internet database resources. For example: funds expended to purchase CINAHL on CD-ROM from Ovid; or to access UptoDate or MDConsult via the Internet. *NOTE: If the Library Service or Library Section transferred funds from its control point to the VISN to pay for access through a VISN-wide contract, then report those dollars here.*

(7) **Line 7, Columns A-C.** Dollars spent on satellite programming.

(8) **Line 8, Columns A-C.** Dollars spent on ILL activity.

(9) **Line 9, Columns A-C.** Dollars spent on all other expenses not covered by preceding Lines 1-8. This includes supplies, professional membership fees, consortium fees, binding, contracts, etc.

(10) **Lines 1-9, Column E.** Report all revenue generated by the Library Service or Library Section no matter what account into which the money is deposited (e.g., service or section control point, medical center general revenue fund, general post funds, Electronic Funds Transfer System (EFTS) account credits, etc.)

b. <u>**Section B - Materials Collection.**</u> *NOTE: See Definitions for: Administrative Materials Collection (subpar. 2a); AV Software (subpar. 2c), Audiovisual Hardware (subpar. 2d), Circulation (subpar. 2e), Consolidated Facility (subpar. 2f), Electronic or Internet Resources (subpar. 2g); Health Sciences Library (subpar. 2h), ILL (subpar. 2i), Monographs (subpar. 2l); Non-VA Libraries (subpar. 2n), Patient Health Education Collection or Library (subpar. 2p), Patient Information Center or Library (subpar. 2q), Periodicals (subpar. 2r), Photocopy (subpar. 2c), and Title (subpar. 2w).* **Section B, Line 1 Health Science Library, Line 2 Patient Health Education Collection or Library, and Line 3 Patient Information Center or Library, Columns A through D.** Use lines 1(A), 2(A), and 3(A) to report the number of titles added to the collections as of September 30 of the reporting year. Use lines 1(B), 2(B), and 3(B) to report the number of titles deleted from the collections as of September 30 of the reporting year. Use lines 1(C), 2(C), and 3(C) to report the total number of titles in the collection as of September 30 of the reporting year. <u>Do not include networked titles.</u> Include only locally acquired titles.

(1) **Column A, Monographs**

(a) All formats, print and non-print, of a title are to be counted here. Multiple copies of titles held in different formats are only counted once. For example: A library holding a copy of <u>Harrison's Principles of Internal Medicine</u> in print and in CD-ROM format would only count one title.

<u>1</u>. Monographs that are included in the purchase of an audiovisual program are to be considered part of the audiovisual and should not be counted as an addition to the monograph collection. For example: the book <u>The One Minute Manager</u> is included in the purchase of the audiovisual by the same title. The book is part of the audiovisual "kit" and should not be reported as an addition to the monograph collection.

<u>2</u>. CD-ROMS or computer programs that are included in the purchase of a monograph are to be considered part of the monograph and should not be reported as an addition to the electronic and/or Internet resources. For example: the book <u>Neuropsychological Scales</u> includes a floppy disk of some neuropsychological testing instruments. The floppy disk is part of the monograph and should not be reported separately.

(b) Networked titles are not to be included as part of the local collection on the Annual Statistical Report. If networked items have been counted as part of the local collection, use the distribution number supplied by VA Central Office Library Program Office to adjust the size of

the number of titles held at the end of the reporting year. A networked title that has been weeded from the network collection and which has been retained may be considered part of the local collection. If needed, networked titles may be included as part of the local collection when reporting this data to local (facility or VISN-level) management. However, when submitting the Annual Statistical Report to VA Central Office, a site must remove networked titles from the total count of titles held.

(c) Count titles not volumes. For example: count the two-volume edition of Harrison's Principles of Internal Medicine as one title.

(d) Do not include second or additional copies of a previously counted title within a collection in this count. For example: a library holding two or more copies of Harrison's Principles of Internal Medicine would count the title once no matter how many copies are on the shelf within a given collection.

(e) Previous editions of monographs, which are retained as part of the collection, are counted as a separate title if they are a separate catalog entry. For example: the library has the current edition of Harrison's Principles of Internal Medicine plus the previous edition. That would count as two titles. Serial monographs such as Physician's Desk Reference(PDR) that have open entry cataloging are counted as one title no matter how many editions the library has retained in the collection.

(2) **Column B, Periodicals-Active Subscriptions**

(a) All formats, print and non-print, of a title are to be counted here. Multiple copies of titles held in different formats are only counted once. For example: a library subscribing to JAMA in print and in an electronic format would only count one title.

(b) Count titles not volumes and/or issues. For example: count JAMA as one title. Do not count how many volumes or issues of the journal are on the shelf.

(c) Do not include second or additional subscriptions of a previously counted periodical title within a collection in this count. For example: a library with two or more subscriptions to JAMA would count the title once no matter how many subscriptions have been purchased.

(d) All previous titles of a periodical currently being published and to which the library has an active subscription are counted as part of the current title. For example: a journal that has undergone three title changes and to which the library has an active subscription to the current title is counted as one title.

(3) **Column C, Periodicals-Inactive**

(a) All formats, print and non-print, of a cancelled or ceased title being retained as part of the collection for use by library patrons, are to be counted here.

(b) Count titles not volumes and/or issues. For example: count <u>JAMA</u> as one title. Do not count how many volumes or issues of <u>JAMA</u> are on the shelf.

(c) A title change of an active subscription is not counted as a separate journal title.

(4) **Column D, AVs**

(a) All formats are to be counted here.

(b) Networked titles are not to be included as part of the local collection on the Annual Statistical Report. If networked items have been counted as part of the local collection, use the distribution number supplied by VA Central Office Library Program Office to adjust the size of the number of titles held at the end of the reporting year. A networked title that has been weeded from the network collection and which is retained, may be considered part of the local collection. Only current networked titles may be included as part of the collection when reporting this data to local (facility or VISN-level) management.

(c) Do not include second or additional copies of a previously counted audiovisual title within a collection in this count. Example: A library with two or more locally purchased copies of <u>I am Joe's Lung</u> would count the title once no matter how many copies are on the shelf within a given collection.

c. <u>**Section C - Materials Usage.**</u> *NOTE: See Definitions for: AV Software (subpar. 2c), Audiovisual Hardware (subpar. 2d), Circulation (subpar. 2e), Consolidated Facility (subpar. 2f), Health Sciences Library (subpar. 2h), ILL (subpar. 2i), Monographs (subpar. 2l); Non-VA Libraries (subpar. 2n), Patient Health Education Collection or Library (subpar. 2p), Patient Information Center or Library (subpar. 2q), Periodicals (subpar. 2r), Photocopy (subpar. 2c), Title (subpar. 2w), and Ward Cart (subpar. 2x).*

(1) **Lines 1(A) Health Sciences Library, 3(A) Patient Health Education Materials, and 5(A) Patient Information Center or Patient's Library, Columns A through C.** Number of materials (including networked materials) borrowed via ILL from all other VA locations. This does not include items transferred, loaned, and/or circulated between divisions of a consolidated facility.

(2) **Lines 1(B) Health Sciences Library, 3(B) Patient Health Education Materials, and 5(B) Patient Information Center or Patient's Library, Columns A through C.** Number of materials borrowed via ILL from non-VA sources.

(3) **Lines 2(C) Health Sciences Library, 4(C) Patient Health Education Collection, and 6(C) Patient Information Center or Patient's Library, Columns A-C.** Number of materials (including networked materials) loaned to all other VA locations via ILL. This does not include items transferred, loaned, and/or circulated between divisions of a consolidated facility.

(4) **Lines 2(D) Health Sciences Library, 4(D) Patient Health Education Collection, and 6(D) Patient Information Center or Patient's Library, Columns A-C.** Number of materials (including networked materials) loaned to all non-VA locations via ILL.

(5) **Line 2(E) Health Sciences Library, 4(E) Patient Health Education Collection, and 6(E) Patient Information Center or Patient's Library, Columns A-C.** Number of materials (including networked materials) circulated to local facility patrons, i.e., staff, students, patients. This includes: materials shown over closed-caption television (CCTV), if data is available; photocopies made by library staff for local facility patrons; materials transferred, loaned, and/or circulated between divisions of a consolidated facility; photocopies made by patrons from library materials; and/or materials circulated (checked-out) from a ward cart.

(6) **Line 7, Rows A-C. Searches Completed by Library Staff.** See Definitions for Searching. Total number of searches performed by Library Staff separated by the categories Health Sciences Library (i.e., a clinician asks for a search on treatment for gout), Patient Health Education Collection or Patient's Library (i.e., a patient asks for information on a drug they are taking), and Patient Information Center or Patient's Library (i.e., a staff person or patient asks for information on veterans education benefits).

(7) **Line 8.** Number of materials distributed (given away) from a ward cart, e.g., paperbacks, newspapers, magazines, etc. This does not include materials that are part of a library's permanent collection and are circulated with the expectation that they will be returned to the library.

(8) **Line 9.** Number of consumer health or patient education materials distributed (given away); e.g, pamphlets, printouts from Internet web sites, etc. Examples include: "Quit Smoking" pamphlets handed out from a ward cart; mass copies of flu shot guidelines printed from the Center for Disease Control and Prevention (CDC) website and handed out from the circulation desk or from a rack in the library; twenty copies of a diabetic foot care pamphlet sent to an outpatient clinic for distribution to patients; etc. These items were printed or copied or acquired in multiple quantities with the intent to distribute. *NOTE: This does not include materials that are part of a library's permanent collection and are circulated with the expectation that they will be returned to the library or photocopies made from library owned print or non-print resources (see Section C, Line 5(E), Columns A and B) or copies made from resources available on the Internet (see Section C, Line 7B) and given to a patient or employee as the result of a specific reference request.*

(9) **Line 10.** Number of times AV equipment was circulated by the Library Service or Library Section.

VA LIBRARY NETWORK (VALNET) DATABASE SERVICE
POLICIES AND PROCEDURES

1. ACCESS: Centralized access to DIALOG databases is provided to the Department of Veterans Affairs Libraries Network (VALNET) through Library Service or Library Sections at designated search sites. The distribution and/or delivery of VALNET Database Service is based on factors such as:

   a. Network usage;

   b. Database subject coverage;

   c. Agency priorities;

   d. Opportunities provided by emerging technologies;

   e. Analysis of cost-avoidance and/or cost benefit; and

   f. Availability of centralized funds.

NOTE: Access to the basic biomedical databases; i.e., MEDLINE and HEALTHLINE, will not be provided by these designated search sites.

2. SCOPE

   a. The designated Library Service or Library Sections will provide search service on the DIALOG data bases to all VALNET libraries within their geographic area specified by Health Information Resources Service, Veterans Health Administration (VHA), Department of Veterans Affairs Central Office.

   b. The designated Library Service or Library Section will make every effort to execute searches within 2 working days of receipt. The searcher will contact the requesting Library Service or Library Section if the search will be delayed.

   c. The designated Library Service or Library Section will make every effort to transmit search results via telefacsimile or telecommunications.

   d. Unless otherwise specified and justified by the patron, only standard bibliographic citations, including author, title, and source, will be provided.

   e. The number of citations printed on-line will depend on cost, time, patron specifications, urgency of the request, and judgment of the searcher.

    f. Search results for routine requests, i.e., those for which the patron does not specify rush or deadline date, will be returned to the requesting library no later than the second day after receipt of search request.

    g. Search results for rush requests, i.e., those justified by the patron as requiring immediate action to respond to patient care emergencies, or inquiries from the facility Administration (Director) will be transmitted by telephone or electronic mode the same work-day received.

    h. Search results will include information identifying the searcher, data bases searched, and terms used. The searcher should be contacted by the requesting Library Service or Library Section if there are questions about results or need for reformulation and re-execution of the search.

3. PROCEDURES

  a. **Submission.** Search requests may be submitted by the Library Service or Library Section via mail, electronic mail, telephone, or fax. *NOTE: To ensure that the search site has complete information, the requesting Library Service or Library Section will submit a completed VA Form 10-7041, Request for Bibliographic Search, and a self-addressed mailing label, or appropriate facsimile, for each search requested.*

  b. **Quantity.** The designated Library Service or Library Sections may perform two searches for the local health care facility for every search performed for another VALNET library.

  c. **Reporting.** The designated Library Service or Library Sections will submit to the Library Program Office, VHA Central Office, by the 15th day of each month, a list of DIALOG searches performed. The following information will be included:

    (1) Requesting VA health care facility;

    (2) Date each search was executed;

    (3) Data bases searched;

    (4) On-line time required;

    (5) Number of on-line citations printed; and

    (6) Number of off-line citations printed.

  d. Those facilities requiring regular access to centralized data bases should explore acquiring on-site access through local recurring funding.

  e. Questions related to the VALNET Database Service should be directed to the Director, Library Programs Office (193B), VHA Central Office.

PROCUREMENT OF CATALOGING RECORDS

1. PROGRAM DESCRIPTION

Cataloging records are provided through a centralized contract funded and monitored by Library Program Office, Health Information Resources Service (HIRS), Veterans Health Administration (VHA) Central Office.

2. PRODUCT POLICY

Centrally-produced cataloging records, including catalog cards, will be provided for nonfiction titles only. Library Service or Library Sections may obtain cataloging records for fiction materials through commercial sources using local funds. All materials for which cataloging is requested will be input into Department of Veterans Affairs Library Network (VALNET) Union Lists.

a. **Classification.** Materials will be classified according to National Library of Medicine, Library of Congress (LC), or Dewey Decimal classification schemes, to be specified on Department of Veterans Affairs (VA) Form 10-7018, Catalog Service Request.

(1) NLM classification will be the authority for the majority of medical titles; NLM Medical Subject Headings (MESH) will be followed.

(2) LC classification and subject headings will be used to supplement NLM classification for most non-medical titles included in health sciences library collections.

(3) Dewey Decimal classification may be used for other titles, especially Patient Information Center or library recreational materials. Classification numbers will not ordinarily run beyond one decimal point. LC List of Subject Headings will be followed.

b. **Special Identification Codes.** Reference indicators, delivery level abbreviations, centrally directed subjects, may be included as either part of the call number or in the body of the descriptive cataloging.

c. **Descriptive Cataloging.** Descriptive cataloging will be provided primarily from LC records and authority files.

d. **Catalog Card Sets.** When catalog records are provided, author, title, appropriate subject and added entry, shelflist, and one additional main entry card will be furnished for all titles.

e. **Centrally Provided Material.** Cataloging records representing audiovisuals and print material acquired centrally and delivered to network delivery points are made available automatically to all VALNET libraries.

3. PROCEDURES

VA Form 10-7018, Catalog Service Request, or a facsimile thereof, will be completed for all cataloging requests, unless otherwise authorized, and forwarded directly to the contractor. Requests for catalog cards must not be submitted prior to actual receipt of the materials for which catalog cards are being requested. The Library Program Office, VHA Central office, cataloging policy serves as the final authority for cataloging decisions.

a. **<u>Local Responsibility.</u>** Local Library Service or Library Sections are responsible for submitting accurate and complete cataloging requests, following up on delinquent receipts, and reporting cataloging errors.

b. **<u>VHA Central Office Responsibility.</u>** The Library Program Office, VHA Central Office, will seek adequate centralized funding to support VALNET cataloging needs, provide mechanisms for producing cataloging records, monitor the program using VALNET input, provide status, error, and statistical reports to VALNET, and serve as liaison with the Ohio College Library Consortium and other contractors involved in providing cataloging products and services.

VA LIBRARY NETWORK (VALNET)
AUDIOVISUAL SOFTWARE DELIVERY SYSTEM

1. **Definition**. The audiovisual (AV) Software Delivery Program provides access to multiple copies of AV programs to Veterans Health Administration (VHA) employees nationwide through the VA Library System. Materials included in the AV Software Delivery Program are produced or purchased by the Department and approved through the AV Production Review Process (see M-8, Pt. III, Chap.5). AV programs must support a departmental training priority, represent a major trend in health care or hospital administration or be materials that would be difficult to justify and acquire on a local level because of cost or limited use. Choices are based on review, suggestions from other VHA Central Office officials, and recommendations from individual field staff. Library Program Office, VHA Central Office, directs the placement or removal of specific programs based upon the relevance and accuracy of program content and the documented use of each program.

2. **Acquisition and Delivery**. Based upon projected use and fiscal constraints, networked AV materials will be acquired and delivered at the following delivery levels (delivery levels will be periodically adjusted to accommodate changes in patterns of use):

    a. **Regional.** One copy at each of the Regional Library Services or Library Sections and VHA Central Office Library.

    b. **Double Regional**. Two copies at each of the Regional Library Services or Library Sections and one copy at VHA Central Office Library.

    c. **All Health Care Facilities (HCF)**. One copy at each health care facility Library Service or Library Section and Central Office Library.

    d. **National.** One copy at each health care facility Library Service or Library Section and Central Office Library, as well as any other Department of Veterans Affairs (VA) (e.g., outpatient clinics, Veterans Integrated Service Network (VISN) offices) or non-VA unit deemed necessary.

3. **Access.** Networked materials may be accessed through the networked AVs catalog, catalog card sets provided to all Library Service or Library Sections, and the union lists of materials held in VALNET, and "Networked AV Reports," a file available over FORUM.

4. **Ownership**. All networked AV programs are the property of Library Program Office, VHA Central Office, which is responsible for their maintenance and replacement. Lost or defective programs should be directed to Library Program Office, VHA Central Office, for replacement.

5. **Statistics.** Use and viewers statistics for each program must be maintained by the Library Service or Library Section that holds the program and reported via the FORUM Inter-Library Loan (ILL) module.

6. Lending and Borrowing Policy and Procedures

   a. **Scope.** This policy applies to all centrally-provided AVs received and loaned by delivery sites. The designated regional delivery site library for a field facility corresponds to the VISN catchment area.

   b. **Responsibilities of Delivery Sites**

   (1) The delivery site will assure fair access to the collection by all Library Service or Library Sections in the catchment area served. If local need for a networked AV, conflicts with the responsibility of the delivery site to lend the AV to other Library Service or Library Sections, the delivery site should acquire a copy for local use.

   (2) For scheduling and use, access to networked AV materials will be based on a first-come, first-served basis. Reserves will be accepted up to a maximum of 2 months in advance of show date. Delivery sites will use the following list of priorities to resolve scheduling or waiting list conflicts:

   (a) VALNET Library Service or Library Sections within the designated delivery area;

   (b) Other VA offices within the designated delivery area, e.g., cemeteries, regional offices;

   (c) VALNET Library Service or Library Sections outside the designated delivery area, referred by another delivery site;

   (d) Department of Defense libraries or libraries of affiliated institutions;

   (e) Libraries which belong to consortia with VALNET; and

   (f) Community libraries.

   (3) Networked AVs circulate for 3 weeks, including the time required for both transit and use. The delivery site will notify the requesting Library Service or Library Section of the unavailability of a requested title within 2 days of receipt of the loan request. Unless a specific request for confirmation is made, no notification is made if the title is available for the requested dates.

   (4) When a waiting list of more than three requests develops, the delivery site is responsible for investigating the availability of the program from other delivery sites, and making referral arrangements. If the item is not available, the delivery site will investigate the possibility of obtaining the program from VHA Central Office Library and recommending that Library Program Office consider elevating the program's delivery level.

   (5) If borrowers habitually neglect to:

   (a) Provide user and viewer statistics;

(b) Return the complete program; or

(c) Return the program on or before its due date, the Library Manager at the delivery site will advise the Chief, Library Service or Library Section, at the borrowing site (or responsible official at sites with no Library Service or Library Section) of the recurring problem and document specific incidents on VA Form 119, Report of Contact, and transmit a copy to the Chief, Program Design and Development Division (193BC), VHA Central Office. If the problem continues, the Library Manager at the delivery site will advise Library Program Office, VHA Central Office, in writing, that the borrowing site has not been able to resolve the problem.

(6) Delivery sites are responsible for collecting and recording user and viewers statistics for networked AVs loaned within their health care facility or to non-VALNET libraries. Borrowing sites are responsible for submitting user and viewer statistics for each delivery item borrowed via the ILL module.

(7) Delivery sites are responsible for requesting replacement of lost or damaged networked AVs from the Chief, Program Design and Development Division (193BC), within 1 week of confirmation of loss or damage.

c. **Responsibilities of Borrowing VALNET Sites**

(1) The borrowing site will ensure that all networked AVs are returned either to the delivery site, or sent to another borrowing site if so instructed by the delivery site, by date due. The borrowing site will provide the user and viewer information for each AV borrowed via the ILL module. Borrowers may not request networked AVs from delivery sites outside their designated region; such referrals will only be made by Designated Delivery Sites. If local use for a single networked title, other than all health care facilities, exceeds one use per quarter, the borrowing site should consider acquiring a local copy.

(2) Requests for an extension of the loan period should be made as far in advance of the due date as possible. An extension will be granted only if there is no waiting list for the title or if it does not conflict with a scheduled showing at another location.

(3) If the delivery site habitually neglects to:

(a) Notify the borrowing site of the unavailability of an AV within 2 days of receiving the request.

(b) Honor advanced bookings.

(c) Make referrals to other delivery sites.

(d) Deliver AVs on confirmed show date.

(4) The Library Manager at the borrowing site will advise the Chief, Library Service or Library Section, at the delivery site of recurring problems and document specific incidents using VA Form 119 and transmit a copy to Chief, Program Design and Development Program (193BC) . If the problem continues to occur, the Library Manager at the borrowing site will advise the Chief, Program Design and Development Division (193BC), in writing, that the delivery site has not been able to resolve the problem.

d. **Responsibilities of Library Program Office (193B)**

(1) The Chief, Program Design and Development Division (193BC):

(a) Develops and maintains the networked AV collection;

(b) Ensures access to the collection by providing copies of programs and replacements, on request, to designated delivery sites; and

(c) Ensures currency and usefulness of the collection by conducting an annual review of program use.

(2) Upon receipt of a written complaint of negligence against a borrowing site, the Chief, Program Design and Development Division (193BC), will advise the Library Manager at the borrowing site that if the problem is not resolved:

(a) The supervisor will be advised of the situation; and

(b) Service to that facility may be suspended for 1 month. Continued violation may result in termination of Audiovisual Software Delivery Program borrowing privileges for an extended period.

(3) Upon receipt of a written complaint of negligence against a delivery site, the Chief, Program Design and Development Division (193BC) will advise the Library Manager at the delivery site that if the problem is not resolved, the supervisor will be notified. Continued violation may result in reassignment of the networked AVs to another facility.

e. **VALNET Responsibilities**

(1) User and viewer statistics are required for each title. The borrowing library is responsible for ensuring these statistics are provided via use of the FORUM ILL module.

(2) The delivery sites will notify the Chief, Program Design and Development Division (193BC), of items with more than a 3-month waiting period.

VA LIBRARY NETWORK (VALNET) PRINT DELIVERY SYSTEM

1. Materials will be considered for inclusion in the Print Delivery System if they are produced by the agency; represent a major agency program thrust; or represent materials that would be difficult to acquire at the local level. The delivery of print materials to VALNET is managed by Library Service, Department of Veterans Affairs (VA) Medical Center, Salt Lake City, UT. Library Program Office, Veterans Health Administration (VHA) Central Office, will direct the removal of specific programs based upon the relevance and accuracy of program content.

2. Donated print materials will be accepted for distribution and inclusion in the Print Delivery System when the content is within the scope of the Agency's mission and goals and is approved by the appropriate VHA Central Office Service. Personal recreational reading materials will not be included as part if the Print Delivery System and will be referred to Voluntary Service for appropriate action.

3. Access to these items is through cataloging records and the VALNET union lists of materials.